

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Takehisa KATSURA
Serial No: 10/810,351
Confirmation No: 8249
Filed: March 26, 2004
For: Body Frame for Motorcycle

Art Unit: 3611
Examiner: Lum Vannucci, Lee Sin Yee

I hereby certify that this correspondence is being transmitted via electronic filing on the date indicated below to:
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450, on
December 8, 2006
Date of Deposit
Vivian Gutierrez
Name
Signature Date 12/8/2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

- ☒ Petition for Extension of Time.
☒ Amendment.

The fee has been calculated as shown below:

| | (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | | (Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | | (Col. 3) PRESENT EXTRA* | LG/SM \$ ENTITY FEE | ADD'L FEE DUE |
|--|---|---|---|-----|-------------------------------|--|------------------|
| TOTAL CLAIMS FEE | 18 | - | 20 | ** | 0 | LG=\$50 SM=\$25 | \$50 \$ 0 |
| INDEPENDENT CLAIMS FEE | 2 | - | 8 | *** | 0 | LG=\$200 SM=\$100 | \$200 \$ 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | | LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180 | \$ 0 |
| ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) | | | | | | \$250 FOR EACH ADDITIONAL 50 SHEETS | \$ 0 |
| Independent Claims: 2, 3, 4, 8, 12, 15, 16 and 17 | | | | | | TOTAL | \$ 0 |

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the amount of \$___ to cover the additional claims fee to Deposit Account No. 50-1314.
☒ Please charge the amount of \$___ to cover the three-month extension fee to Deposit Account No. 50-1314.
☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.
☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By: _____

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Registration No. 36,667
Attorney for Applicant(s)

Date: December 8, 2006

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